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CONFIRMATION NO. 8708

SERIAL NUMBER 10/717,736	FILING or 371(c) DATE 11/20/2003 RULE	CLASS 702	GROUP ART UNIT 2863	ATTORNEY DOCKET NO. BO1 - 0019US
APPLICANTS Scott E. Black, Godfrey, IL; /TL/ Kirby J. Keller, Chesterfield, MO; /TL/ Kevin Swearingen, St. Charles, MO; /TL/				
** CONTINUING DATA ***** None /TL/				
** FOREIGN APPLICATIONS ***** None /TL/				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/TUNG S LAU/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY IL	SHEETS DRAWINGS 4	TOTAL CLAIMS 23
INDEPENDENT CLAIMS 2				
ADDRESS LEE & HAYES, PLLC 421 W. RIVERSIDE AVE. SUITE 500 SPOKANE, WA 99201 UNITED STATES				
TITLE Component health assessment for reconfigurable control				
FILING FEE RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	